

Revised 05/01 WDNV

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF NEW YORK**

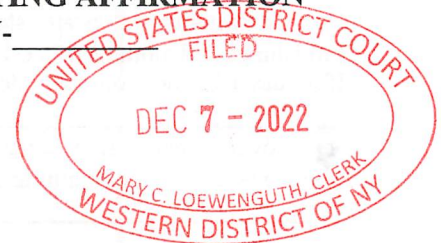
22 CV 946-5

Robert W. Johnson, 101 Hands On & Robert W. Johnson, Esq., Pro Se
(Name of Plaintiff or Petitioner)

**MOTION TO PROCEED *IN FORMA PAUPERIS*
AND SUPPORTING AFFIRMATION**

-CV-

Linda Hesch, et al.
(Name of Defendant(s) or Respondent(s))



I, Robert W. Johnson, (print or type your name) am the plaintiff/petitioner in the above-entitled case and hereby request the Court's permission to proceed *in forma pauperis*.

In support of my motion to proceed without being required to prepay fees, costs, or give security therefor, I state that because of my poverty I am unable to pay the costs of this action or to give security therefor and that I believe I am entitled to redress.

I further declare that the responses which I have made in this affirmation below are true.

1. Are you presently employed? Yes ☐ No ☒
My Employer's Name and Address is: _____

My Gross Monthly Wages are: \$ 0
If you are not presently employed, state
Your Last Date of Employment: _____
Your Gross Monthly Wages at that time: _____
Is your spouse presently employed? Yes ☐ No ☒
My Spouse's Employer's Name and Address is: _____

My Spouse's Gross Monthly Wages are \$ 0
2. Have you received **any money** from any of the following sources within the past twelve months:
 - a. Business, profession or self-employment? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0
 - b. Rent payments, interest or dividends? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0
 - c. Pensions, annuities, disability, or life insurance payments? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0
 - d. Gifts or inheritances? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0
 - e. Child Support? Yes ☐ No ☒
If yes, state **amount received** each month \$ 0
 - f. Government Benefits (Social Security, SSI, Welfare, AFDC, Veterans, etc.)? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0
 - g. Friends, Relatives or any other source? Yes ☐ No ☒
If yes, state **source** and **amount received** per month \$ 0

If you have **not** received any money from any of the above sources, please explain how you are currently paying your expenses:

3. What is your total gross monthly income today: \$ 0
4. How much **cash** do you have on hand? \$ 0

5. How much money do you have in a **checking account(s)**? \$ 0
6. How much money do you have in a **savings account(s)**? \$ 0
7. If you are an inmate of a correctional facility, state the amount of funds in your inmate account (**NOTE: prisoners must have inmate account balances certified by an authorized official of the correctional facility and must include a signed Authorization for payment of the filing fee**): N/A
8. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes ☐ No ☒ X
If so, describe the property in detail and give an estimated value of the property: _____

If you own property, are you paying off a loan or mortgage on it? Yes ☐ No ☒ X
If yes where are you obtaining the money to make such payments: N/A
9. If you are not an inmate, state your **total monthly household expenses**:
Rent or mortgage \$ 0 Food \$ 0 Utilities \$ 0 All other expenses \$ 0
If your monthly expenses exceed the amount of income you listed in # 3 above, please explain how you are paying your expenses
N/A
10. List **all** of the people who are in your household and state the amount of money each one contributes to household expenses each month: N/A
11. List the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support: N/A
12. Have you been adjudicated bankrupt within the past ten (10) years? Yes ☐ No ☒ X
If the answer is yes, please include the court and date of filing N/A

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

12/06/2022
(Date)

Robert W. Johnson
(Applicant's Signature)

PRISON CERTIFICATION SECTION

(Required for Prisoner Requests Only; Prisoner Requests Must Have This Section Completed By Prison Official)

I certify that the movant has the sum of \$ _____ on account to his/her credit at the _____
_____ Correctional Facility where s/he is currently confined.

I further certify that the movant has the following securities to his/her credit according to the institution's records: _____

I further certify that the movant's average account balance was \$ _____ during the last six months.

Signature of Authorized Officer of Institution

Print Name of Authorized Officer of Institution